

ISSUE FLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M		6-12-01
O.I.P.E. CLASSIFIER		1020 <sup>49</sup>	6/20/01
FORMALITY REVIEW		835	08/06/01
RESPONSE FORMALITY REVIEW	JK		10/05/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	3-9-01
2	6-25-01
3	✓
4	✓
5	✓
6	N
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31	✓
32	✓
33	✓
34	✓
35	✓
36	N
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46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	3-9-04
52	N
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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829  
08/06  
RESR-X 587  
10/06/01